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COVER LETTER

TO:	Registration Sec								
	Division of Corporations PARKMEADOWS SOHO CORPORATION								
CLIDI		ADOWS SOHO CO	DRPORATIO	ON					
SORI	ECT:	Name of	corporation	- must	include suffix	<u> </u>			
Dear S	Sir or Madam:		•						
"Certi	ficate of Existence	on by Foreign Corp e," or "Certificate of a corporation to tra	f Good Star	ıding" a	nd check are sub				
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Please return all correspondence concerning this matter to the following: MAGGIE PAIK						F	E! 22		
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			Name of	Person		· ·			
MAGGIE PAIK P A						i.	ب	1 1	
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WINT	ER PARK, FL 327	89	Addi	533					
			City/State a	nd Zip	code				
MAG	GIEPAIK@GMAIL	СОМ							
·	· -	E-mail address:	(to be used	for futu	re annual report i	notification)			
For fu	rther information	concerning this ma	tter, please	call:					
MAGGIE PAIK			407	628-4553					
	Name of Person		t (Area Cod) le	Daytime Telep	hone Number			
STREET/COURIER ADDRESS:					MAILING ADDRESS:				
Registration Section			Registration Secti						
Division of Corporations Clifton Building			Division of Corpor P.O. Box 6327			•			
2661 Executive Center Circle Tallahassee, FL 32301				Tallahassee, FL 32314					
Enclo	sed is a check for	the following amou	ınt:						
s \$7	0.00 Filing Fee	S78.75 Filing Certificate of			'5 Filing Fee & fied Copy	\$87.50 F Certifies Certifies	ite of Sta		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. PARKMEADOWS SOHO CORPORATION (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 81-4713969 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of duration, if other than perpetual) (Date of incorporation) JULY 1, 2018 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 8001 S ORANGE BLOSSOM TRAIL, ORLANDO, FL 32809 (Principal office address) 1201 MUANO ST APT A-207, KISSIMMEE, FL 34741 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) MAGGIE PAIK Name: 1971 LEE RD, SUITE 201 Office Address:

9. Registered agent's acceptance:

WINTER PARK

(City)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

32789

(Zip code)

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS KUASHA PLAGENS Chairman: 1201 MUZANO ST ATP A-207 Address: KISSIMMEE, FL 34741 Vice Chairman: Director: Address: Address: ___ B. OFFICERS حز President: Kuasha Plagens Ç() 5= Address: 1201 MUZGOO ST Apt A 207 ssimmee FL 34741 Vice President: Address: Secretary: ___ Address: Treasurer: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. KUASHA PLAGENS (Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

PARKMEADOWS SOHO CORPORATION

is a

Corporation

formed or registered on 12/16/2016 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity, identification number 20161847530.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/28/2018 that have been posted, and by documents delivered to this office electronically through 06/29/2018 @ 09:06:28.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 06/29/2018 @ 09:06:28 in accordance with applicable law. This certificate is assigned Confirmation Number 10982355



mynew.

Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.uv/biz/CertificateSearchCriteria.do entering the certificate confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate of a certificate. For more information, visu our Web site, http://www.sos.state.co.us/click "Businesses, trudemarks, trade names" and select "Frequently Asked Questions."